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10064173-061303

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| EFS ID: | 15877 |
| Application ID: | 10064173 |
| Title of Invention: | METHOD AND SYSTEM FOR OPTIMIZING THE DESIGN OF A MECHANICAL SYSTEM |
| First Named Inventor: | Anil Dhir |
| Domestic/Foreign Application: | Domestic Application |
| Filing Date: | null |
| Effective Receipt Date: | 2002-06-18 |
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| Confirmation Number: | 0 |
| Attorney Docket Number: | 200-1167 |
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| Total Fees Authorized: | \$740.0 |
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| Deposit Account Number: | 61510 |
| Deposit Account Name: | Sheri L. Charles |



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Attorney Docket
Number:

200-
1167

Submission Type: Utility Patent
Filing

METHOD AND SYSTEM FOR OPTIMIZING THE DESIGN OF A MECHANICAL SYSTEM

First Named Inventor: Anil Kumar Dhir

SUBMITTED BY

Organization Name:

Ford Motor Company

Name:

Sheri Lynn Charles Electronic
Application Specialist

Electronic Signature Mark: /slc

Date Signed: 20020618

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Attached Files:

declaration

unsigned_declaration1of2.tif

declaration

unsigned_declaration2of2.tif

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|-----------------|-------------------|
| declaration | consent.tif |
| bid-transmittal | 200-1167apds.xml |
| fee-transmittal | 200-1167fee.xml |
| specification | specification.xml |

Attached Image File(s):

unsigned_declaration1of2.tif
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consent.tif

200-1167-061806

Comments:

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DECLARATION AND POWER OF ATTORNEY - ORIGINAL APPLICATION

Attorney's Docket No.
200-1167

As a below named inventor, I hereby declare:

My residence, post office address and citizenship are as stated below next to my name;

I verily believe I am the original, first and sole inventor or an original, first and joint inventor of the subject matter that is claimed and for which a patent is sought on the invention entitled

METHOD AND SYSTEM FOR OPTIMIZING THE DESIGN OF A MECHANICAL SYSTEM

the specification of which is attached hereto.

I have reviewed and understand the contents of the specification identified above, including the claims.

I acknowledge my duty to disclose information of which I am aware that is material to the examination of this application in accordance with Section 1.56(a), Title 37 of the Code of Federal Regulations; and as to application for patents or inventor's certificate on the invention filed in any country foreign to the United States of America prior to this application by me or my legal representatives or assigns,

☐ no such applications have been filed, or☒ such applications have been filed as follows:☐ I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below

| COUNTRY | APPLICATION NO. | DATE OF FILING (month, day, year) | DATE OF ISSUE (month, day, year) | PRIORITY CLAIMED UNDER 35 USC 119 | <input type="checkbox"/> Additional provisional application numbers are on a separate priority data PTO/SB/02E attached hereto |
|---------|-----------------|--------------------------------------|-------------------------------------|-----------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|
| US | 60/299280 | 6/18/2001 | | YES | |
| | | | | | |

I hereby claim the benefit under 35 U.S.C. § 120 of any United States application(s) or § 365(c) of any PCT International application designating the United States, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. § 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR § 1.56 and which became available between the filing date of the prior application and the national or PCT International filing date of this application.

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| (Application Number) | (Filing Date) | (Status - patented, pending, abandoned) |
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| (Application Number) | (Filing Date) | (Status - patented, pending, abandoned) |
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POWER OF ATTORNEY: - I/we hereby appoint Practitioners at Customer No. 022844, as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office and foreign Patent Offices.

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the the application or any patent issuing thereon.

| NAME AND MAILING ADDRESS OF INVENTOR: | RESIDENCE | CITIZENSHIP | SIGNATURE | C |
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| | | | | |

PATENT APPLICATION

ASSISTANT COMMISSIONER FOR PATENTS
Washington, D. C. 20231

Case Docket No. 200-1167
Date: June 18, 2002

Sir:

Inventor(s):
Anil Dhir
Scott Crane

For: **METHOD AND SYSTEM FOR OPTIMIZING THE DESIGN OF A MECHANICAL SYSTEM**

The attorney or agent below has reviewed this application and its attachments and consents to electronic filing by the assignee.

Respectfully submitted:



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FEE TRANSMITTAL

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Stylesheet Version: 1.0

Patent fees are subject to annual revisions on or about October 1st of each year.

Large Entity

TOTAL FEES AUTHORIZED: \$ 740

The commissioner is hereby authorized to charge indicated processing and/or publication fees and credit any overpayments to:

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Charge Any Additional Fee Required Under 37 C.F.R. Sections 1.16 and 1.17.

Charge Assignment Fees Required Under 37 C.F.R. Section 1.21 (h).

SUBMITTED BY

Authorized Name: Sheri L. Charles

Electronic Signature Mark: /slc

Date Signed: 20020618

BASIC FILING FEE

| Fee Description | Fee Code | Fee Paid |
|--------------------|----------|----------|
| Utility Filing Fee | 101 | \$ 740 |

Subtotal For Basic Filing Fee: \$ 740

EXTRA CLAIM FEES

| | Fee Code | Fee | Extra Claims | Fee Paid |
|-----------------------|----------|-------|--------------|----------|
| Total Claims: 10 | 103 | \$ 18 | 0 | \$ 0 |
| Independent Claims: 2 | 102 | \$ 84 | 0 | \$ 0 |

Subtotal For Extra Claims Fees: \$ 0

10064173-001-001